


PRINTED: 07/27/2016  
FORM APPROVED

## Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HA1026052</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/13/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>VALLEY PINES ADULT CARE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2521 MURIEL DRIVE FAYETTEVILLE, NC 28306</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
(C 000)	Initial Comments  This report is of a Followup Survey done by Bob Getchell on July 13, 2016.  The followup survey revealed that all deficiencies have not been corrected, therefore a new plan of correction is required.	(C 000)		
(C 166)	Housekeeping-Maintained Free of Hazards  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 4-Based on observations, the facility has failed to maintain the exterior wood trim and finishes.  Followup Findings on July 13, 2016 include: The fascia board is rotten at a number of locations at the front and rear of the facility. Also, the finish coating is peeling at all the finish trim boards.  (Powerwashing almost done. Job is about 50% completed.)	(C 168)	Exterior fascia boards have been replaced where needed and pressure washing has been completed of full exterior of building to clean and remove loose paint in preparation to paint. Painting of exterior shall be completed to ensure rule is met. Building owner agrees to maintain the building structure and keep in good repair, when items are identified for repair. Administrator shall notify owner of building of any structural repairs needed in order to be repaired in timely manner.	8-22-16
(C 189)	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical,	(C 189)		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

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KQFD22

Administrator

8-16-16

If continuation sheet 1 of 2

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(C 189)	<p>Continued From page 1</p> <p>mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>2-Based on observation, the facility has not maintained in a safe and operating condition the smoke detection devices for fire and/or smoke from the room of origin.</p> <p>Followup Findings on July 13, 2016 include: The heat detector located in the Linen Closet is damaged.</p> <p>5-Based on observation, the facility has not provided access to fire detection devices.</p> <p>Followup Findings on July 13, 2016 include: The furnaces that are located in the Mechanical Room located at the rear of the facility have no service access panels to inspect and clean the duct detector sample tubes.</p>	(C 189)	<p><i>Gill security was contacted to make repair or replacement of damage smoke detector in linen closet. Administrator shall make monthly inspection visually of all smoke detectors and have repairs done to any that present with any type of damage.</i></p> <p><i>Down South Heating and Air was contacted to install access panels to all three furnaces for access to inspect, clean the duct detector sample tubes.</i></p>	<p><i>8-18-16</i></p> <p><i>8-17-16</i></p>